

what's up?

tobacco use

INFORMATION FOR ADULTS WHO CARE ABOUT TEENS

What's it all about?

Cigarette smoking rates among Washington teens in 2002 dropped to their lowest level in the past several years. While this is great news, there is still much work to do. Tobacco use is a major cause of premature death and considered the single most preventable cause of death in this country. So, teen tobacco use is a major public health concern.

What are the details?

- Each day in the U.S. nearly 6,000 young people under the age of 18 will try a cigarette and nearly 3,000 will become regular smokers. In Washington, 55 kids start smoking every day.
- More than 6.4 million U.S. adolescents living today will die prematurely because they chose to smoke as teens.
- More students experiment with smoking as they get older. According to the 2002 Washington State Healthy Youth Survey, about 5% of 6th graders say that they had tried cigarettes at some point in their lives while about half of 12th graders report this behavior.
- Among all grades surveyed in Washington, cigarette use decreased from 1998 to 2002. However, about 1-in-4 12th grade students say they had smoked cigarettes in the past month and more than 1-in-8 say they smoked on more than 20 of the past 30 days.
- Of the 12th graders in Washington who smoked cigarettes in the past month, more than half had their first cigarette before age 14.
- About 1-in-12 10th graders and 1-in-10 12th graders in Washington used tobacco on school property in the past month.

Why does it matter?

Tobacco use causes disease

Tobacco use causes cancer, heart, and lung diseases. Women who smoke during pregnancy are more likely to have low birth-weight babies. Secondhand smoke can trigger asthma and cause lung cancer. One in 5 deaths in the U.S. are caused by tobacco use.

Smoking impairs development and reduces good health

Teen tobacco use impairs how the lungs grow and function, increases respiratory illnesses and helps cardiovascular diseases develop. Smoking also hurts young people's physical fitness in both performance and endurance.

Smoking is not cool

Tobacco use causes stained teeth, bad breath and foul smelling hair and clothes. Long-term tobacco use can lead to gum disease and tooth loss as well as mouth and throat cancers.

Links to other risks

Teens who smoke cigarettes are more likely to take risks such as ignoring seat belts, getting into fights, and carrying weapons than teens who do not smoke.

Tobacco is addictive

The likelihood of becoming addicted to nicotine after any exposure is higher than it is for other addictive substances including heroin, cocaine, or alcohol. The earlier a person starts smoking, the greater the risk to his or her health and the harder it is to quit. About 80% of adult smokers began smoking at or before age 18.

Smokeless tobacco, too!

Adolescent users of smokeless tobacco (chewing tobacco, snuff) are more likely than nonusers to become cigarette smokers. Smokeless tobacco use increases the risk of oral cancer.

What can I do?

Parents and adults are role models. If you smoke, quit. If you have not quit, do not smoke in front of teens.

- Do not allow smoking in your home. Enforce your “no smoking” rule.
- Ask if tobacco is discussed in school.
- Ask about tobacco use by friends. Compliment tobacco-free teens.
- Support school and community anti-smoking efforts. Tell school officials you expect them to enforce no smoking policies.
- Make tobacco less easily available to teens—support higher taxes on tobacco, licensing of vendors and bans on unattended vending machines.
- Discuss with teens the false and misleading images used in advertising and movies that portray smoking as glamorous, healthy, sexy, and mature.
- Stress the short-term negative effects such as bad breath, yellowed fingers, smelly clothes, shortness of breath and decreased performance in sports.
- Stress that nicotine is addictive.

Can we protect teens?

We know that the following factors increase the risk that a teen will use tobacco. Are you part of the solution?

Teens most at risk for tobacco use:

- Have parents, siblings, or friends who smoke. Most youth smokers have best friends who smoke.
- Act tough and grown up.
- Deny the harmful effects of tobacco.
- Have fewer coping skills and ways to alleviate stress.
- Have depression or poor self-esteem.
- Have poor school performance, especially girls.
- Are very influenced by advertisements that relate cigarette smoking to being thin.
- Suffer from eating disorders.

In order to get youth not to smoke or to stop smoking, they need to hear anti-smoking messages from credible sources—their peers.

—Shannon Brewer, 16

Tobacco Prevention and Control Council Member

**hot
links!**

Washington State Department of Health
DOH Pub 910-119 11/2003
www.doh.wa.gov

Resources listed here are provided as a public service and do not imply endorsement by the State of Washington.

References for source materials are available from the Child and Adolescent Health program, 360-236-3547.

For persons with disabilities, this document is available on request in other formats. Please call 1-800-525-0127.

Tobacco and Health in Washington State www.doh.wa.gov/Tobacco/

UnfilteredTV www.unfilteredtv.com/flash.html

Washington State Department of Health Tobacco Prevention and Control Program

American Cancer Society www.cancer.org

Youth Tobacco Information and Prevention Source www.cdc.gov/tobacco/youth.htm

National Institute on Drug Abuse www.drugabuse.gov/DrugPages/Nicotine.html

American Academy of Adolescent Psychiatry www.aacap.org

Go to Facts for Families, “Tobacco and Kids” (Fact Sheet #68)

Kids Health www.kidshealth.org/parent/positive/talk/smoking.html

“Talking to Your Child About Smoking and Smokeless Tobacco”

Campaign for Tobacco-Free Kids <http://tobaccofreekids.org/>

National Center for Tobacco-Free Kids

Washington State Healthy Youth Survey 2002 www3.doh.wa.gov/HYS/



Dear Colleague,

The Washington State Department of Health (DOH) is pleased to provide camera-ready art for printing this educational material. To ensure that the original quality of the piece is maintained, please read and follow the instructions below and the specifications included for professional printing.

- **Use the latest version.** DOH materials are developed using the most current information available, are checked for clinical accuracy, and are field tested with the intended audience to ensure they are clear and readable. DOH programs make periodic revisions to educational materials, so please check this web site to be sure you have the latest version. DOH assumes no responsibility for the use of this material or for any errors or omissions.
- **Do not alter.** We are providing this artwork with the understanding that it will be printed without alterations and copies will be free to the public. Do not edit the text or use illustrations or photographs for other purposes without first contacting us. Please do not alter or remove the DOH logo, publication number or revision date. If you want to use a part of this publication for other purposes, contact the Office of Health Promotion first.
- **For quality reproduction:** Low resolution PDF files are intended for black and white or color desktop printers. They work best if you are making only one or two copies. High resolution PDF files are intended for reproducing large quantities and are set up for use by professional offset print shops. The high resolution files also include detailed printing specifications. Please match them as closely as possible and insist on the best possible quality for all reproductions.

If you have questions, contact:

Office of Health Promotion

P.O. Box 47833 Olympia, WA 98504-7833

(360) 236-3736

Sincerely,

Health Education Resource Exchange Web Team